

PRINT NAME:

## ASSESSOR'S OFFICE CITY OF HARTFORD, CONNECTICUT

Lawrence LaBarbera, CCMA II Assessor 550 Main Street. Hartford, CT 06103 Telephone: (860) 757-9630 Fax: (860) 722-6142

Motor Vehicle Property Tax Exemption Application for State Resident - Member of the Armed Forces

IF YOU CLAIM EXEMPTION IN THE CITY OF HARTFORD FOR TAXES ON YOUR MOTOR VEHICLE UNDER CGS §12-81(53), IT WILL BE NECESSARY FOR YOU TO COMPLETE THE FOLLOWING.

A NEW APPLICATION MUST BE FILED **ANNUALLY** WITH THIS OFFICE; *FAILURE TO FILE THIS APPLICATION PRIOR TO DECEMBER 31<sup>ST</sup> NEXT FOLLOWING THE TAX DUE DATE, SHALL CONSTITUTE A WAIVER OF YOUR RIGHT TO THIS EXEMPTION.* 

Military Information		
1. On October 1,, I was a member of the armed forces, as d	efined in CGS§ 27-10	03.
2. On the assessment date, I was attached to the following unit:		
3. I have served in this unit since (month /date/year)://		
4. My permanent address is:Number & Street or PO Box	City or Town	State & Zip Code
5. Mailing address:  Number & Street or PO Box	City or Town	State & Zip Code
Vehicle Information		
6. Vehicle Registration (Plate) Number: Make, Model and Year:		
7. On the assessment date, this vehicle was (check one): Owned   Leased   (For leased vehicle complete 8 and 9)		
8. Lease term: to: Lessor: (Name of vehicle owner as it appears on the lease)		
9. Lessor's Address:  Number & Street or PO Box  City or Town		State& Zip Code
Attestation Statement		
I hereby claim a motor vehicle property tax exemption or tax refund for a leased vehicle, pursuant to CGS§ 12-81(53). All Information herein provided is true and accurate to the best of my knowledge and belief.		
Signature of Service Member Signature of Commanding Officer	49	Date Signed
Office Use Only		
GRAND LIST YEAR: Regular   Supplemental   VEHICLE ASSESSMI	ENT \$	_
Signature of Assessor/Staff	Date	